

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
(11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Robert Marreel

Political Party (if applicable)

Independent

Office Sought

County Supervisor

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

18680

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Stephen P. Wen
SIGNATURE OF PERSON FILING REPORT

641-731-2566
TELEPHONE

1-18-11
DATE SIGNED

I AM FILING A January 19, 2011 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1502.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 1502.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

592.50

909.50

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES



CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-8-10	ID# CK# 97	Evans Printing & Publishing 135 E. main, P.O. Box 89 LeRoy, MN 55951	Newspaper Display Ad	\$ 412.50
11-8-10	ID# CK# 98	The Monitor Review P.O. Box 236 Stacyville, IA 50476	Newspaper Display Ad	180.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ 592.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 1

(for Schedule B)

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7-29-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	screws	\$ 2.76	<input type="checkbox"/>
8-5-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	envelopes	5.87	<input type="checkbox"/>
9-1-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	96.00	<input type="checkbox"/>
9-2-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	96.00	<input type="checkbox"/>
9-3-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	stamps	132.00	<input type="checkbox"/>
9-18-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	paper + envelopes	19.61	<input type="checkbox"/>
9-19-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	167.11	<input type="checkbox"/>
9-24-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	185.06	<input type="checkbox"/>
9-27-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	79.16	<input type="checkbox"/>
10-4-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	paint brush	1.48	<input type="checkbox"/>

SUB-TOTAL \$ 785.05

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule E)

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-4-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	stamps	\$ 264.00	<input type="checkbox"/>
10-7-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	plywood	12.49	<input type="checkbox"/>
10-16-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	47.07	<input type="checkbox"/>
10-21-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	printer ink	43.86	<input type="checkbox"/>
10-25-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	stamps	44.00	<input type="checkbox"/>
10-29-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	wire	17.11	<input type="checkbox"/>
11-8-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	newspaper ad Riceville Recorder	25.50	<input type="checkbox"/>
11-8-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	Newspaper Ad Monitor Review	21.00	<input type="checkbox"/>
11-8-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	Newspaper Ad Press-News	45.00	<input type="checkbox"/>
11-15-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	Newspaper Ad Riceville Recorder	25.50	<input type="checkbox"/>

SUB-TOTAL \$ 545.53

TOTAL (if last
page of this
schedule)

\$

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Page 2 of 3
(for Schedule E)

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
11-19-10	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	Newspaper Ad Monitor Review	\$ 21.00	<input type="checkbox"/>
1-11-11	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	loan balance forgiven	590.50	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 611.50

TOTAL (if last
page of this
schedule) \$ 1942.08

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Page 3 of 3
(for Schedule E)

RESET

SCHEDULE

F

(Rev. 02/08)

**LOANS
RECEIVED
& REPAY**☐ **CHECK THIS BOX IF
AMENDING FORM****COMMITTEE NAME** (Must be same as on Statement of Organization)

Marreel for Supervisor Campaign

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 1500⁰⁰**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
1-11-11	Robert Marreel 2375 Hwy 218 Osage, IA 50461	self	\$ 909.50

ck # 99

TOTAL CASH REPAYMENTS (PART II) \$ 909.50

From Schedule E - TOTAL LOANS FORGIVEN \$ 590.50

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1
(for Schedule F)